

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # N51460

1. Entity Name

LEON COUNTY COMMISSION GOVERNMENTAL LEASING CORP

FILED

Apr 12, 2001 8:00 am  
Secretary of State

04-12-2001 90179 025 \*\*\*\*61.25

Principal Place of Business

301 S MONROE ST  
5TH FLOOR  
TALLAHASSEE FL 32301

Mailing Address

301 S MONROE ST  
5TH FLOOR  
TALLAHASSEE FL 32301

00035126



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-3152204

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SAULS, JANE  
3640 LUTHER HALL RD  
TALLAHASSEE FL 32310

Name

Dan Winchester

Street Address (P.O. Box Number is Not Acceptable)

1204 Firethorn Lane

City

Tallahassee

FL

Zip Code  
32303

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE

Dan Winchester, Chairman 4/5/01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW:  
FEE IS \$61.25

9. Election Campaign Financing  
Trust Fund Contribution.

☐

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
THAELL, CLIFF  
9601 MICOSUKEE RD #59  
TALLAHASSEE FL 32308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
WINCHESTER, DAN  
814 LIVINGTON CT  
TALLAHASSEE FL 32303 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Jane Sauls  
3640 Luther Hall Road/  
Tallahassee, FL 32310 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
BILL PROCTOR  
2516 PASCO ST  
TALLAHASSEE FL 32310 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
RACKLEFF, BOB  
816 CHERRY ST  
TALLAHASSEE FL 32301 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
HOST, BRUCE  
2906 TYRON CIRCLE  
TALLAHASSEE FL 32308 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
Anthony M. Grippa  
9158 McDougal Ct.  
Tallahassee, FL 32312 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
D  
MALOY, RUDY  
2324 NAPOLEON BONAPARTE DRIVE  
TALLAHASSEE FL 32308 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with a power of attorney.

SIGNATURE:

4/5/01

(850) 487-1157

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (10/00)